

ORDINANCE/RESOLUTION REQUEST

Please email requests to the Mayor's Legislative Team
at MileHighOrdinance@DenverGov.org by **3:00pm on Monday**.

All fields must be completed.

Incomplete request forms will be returned to sender which may cause a delay in processing.

Date of Request: 10/30/17

Please mark one: Bill Request or Resolution Request

1. Has your agency submitted this request in the last 12 months?

Yes No

If yes, please explain:

2. Title: (Include a concise, one sentence description – please include name of company or contractor and contract control number - that clearly indicates the type of request: grant acceptance, contract execution, amendment, municipal code change, supplemental request, etc.).

Establish a new health special revenue fund, the "Public Health and Wellness" fund, to hold state public health dollars and general fund transfers for public health-related programs.

3. Requesting Agency: Department of Finance – Budget and Management Office

4. Contact Person: (With actual knowledge of proposed ordinance/resolution.)

- **Name:** Derek Moretz
- **Phone:** 720-913-5154
- **Email:** derek.moretz@denvergov.org

5. Contact Person: (With actual knowledge of proposed ordinance/resolution who will present the item at Mayor-Council and who will be available for first and second reading, if necessary.)

Name: Derek Moretz/ Lisa Straight

- **Phone:** 720-913-5154/720 865 5449
- **Email:** derek.moretz@denvergov.org/lisa.straight@denvergov.org

6. General description of proposed ordinance including contract scope of work if applicable:

Establish a new health special revenue fund, the "Public Health and Wellness" fund, Accounting No. 14806-6501000 . This fund will receive a \$500,000 transfer from the General Fund for 2018.

Funding comes from general fund transfers and state public health contributions. Expenditures are for general public health programs including opioid treatment programs.

This will be an appropriated, non-lapsing fund. This is a companion ordinance to the 2018 Long Bill.

****Please complete the following fields:** (Incomplete fields may result in a delay in processing. If a field is not applicable, please enter N/A for that field.)

- a. **Contract Control Number:** N/A
- b. **Duration:** Permanent
- c. **Location:** N/A
- d. **Affected Council District:** N/A
- e. **Benefits:** Better financial accounting of state dollars
- f. **Costs:** N/A

7. Is there any controversy surrounding this ordinance? (Groups or individuals who may have concerns about it?) **Please explain. None.**

To be completed by Mayor's Legislative Team:

SIRE Tracking Number: _____

Date Entered: _____